NEW JERSEY DEPARTMENT OF COMMUNITY AFFAIRS DIVISION OF CODES AND STANDARDS BUREAU OF HOMEOWNER PROTECTION PO BOX 805 TRENTON, NEW JERSEY 08625-0805

URBAN RENEWAL ENTITIES DISCLOSURE INFORMATION

Instructions for Completion: You have filed an application for approval of an urban renewal entity pursuant to the Long Term Tax Exemption Law (N.J.S.A. 40A:20-1 et seg.). In order for us to process the application.

we require that you provide the following informat (609)984-7954. This form must be completed pri questions, please call Karen Schwacha at (609)	tion and forward this form to the above address or fax it to for to Division approval of the entity. If you have any 633-6606.
Name of Urban Renewal Entity:	
SECTION 1: TYPE OF APPROVAL REQUESTE	ED (check one):
Original certificate (of incorporation, lir	mited partnership, formation, etc.)
	ncorporation, limited partnership, formation, etc.). Note: In ard a copy of original certificate marked "filed, State" with this form.
Other (please specify)	
SECTION 2: PROJECT INFORMATION Project Name:	
Project Street Address:	
Project Block Number(s)	
Municipality in which the Project is located	
County in which the Project is located	

SECTION 3 (for project listed in **SECTION 2**.)

(Check one)

_1. This project is solely a commercial project (with no housing units) developed in a redevelopment area pursuant to a municipal redevelopment plan.

URBAN RENEWAL ENTITIES DISCLOSURE INFORMATION. PAGE 2

NAME OF URBAN RENEWAL ENTITY: SECTION 3 (cont.) 2. This project consists solely of market rate housing units developed in a redevelopment area pursuant to a municipal redevelopment plan. NOTE: If you checked 1 or 2, complete SECTIONS 4, 6, and 7. ____3. The project consists of low and moderate income housing units, which may include senior citizen low and moderate income housing units. NOTE: If you checked 3, complete **SECTION 5, 6, and 7**. ____4. This project consists of mixed uses. Specify type: ____Market rate and low and moderate income housing. ___Commercial and market rate housing. ___Commercial and low and moderate income housing. Other (please describe). NOTE: If you checked 4, complete **SECTIONS 4, 5, 6, and 7**. SECTION 4:REDEVELOPMENT PLAN INFORMATION Name of Municipal Redevelopment Agency Citation of municipal ordinance adopting the redevelopment plan _____ For housing projects, complete the following: Specify type and number of units as applicable: ___Condominium units ____ ___Market rate rental ___Low and moderate income in mixed use projects _____ ___Senior citizen in mixed use projects_____ Other (please specify) _____ Total number of units _____ **SECTION 5: PROJECT FUNDING SOURCES**

The low and moderate income housing project will be financed or insured by which of the following (check

____ State or Federal financing or insuring agencies (Please specify below) ____ Other (Please specify) ____

all applicable):

___ Private funds(Please specify)

URBAN RENEWAL ENTITIES DISCLOSURE INFORMATION, PAGE 3

NAME OF URBAN RENEWAL ENTITY: _____

SECTION 5: PROJECT FUNDING SOURCES (cont.)	
State or Federal Financing or Insuring Agencies for the Project (check all that apply):	
NJ Department of Community Affairs: Neighborhood Preservation Balanced Housing Downtown Living Initiative Program HOME – Housing Production Investment Fund HOME – Neighborhood Preservation HOME – Rental Rehabilitation	
NJ Housing and Mortgage Finance Agency: NJ Community Housing Demo Program (developmental disabilities) NJ Supportive Housing Program Shared Residence Rental Housing Program (community residence) Transitional Housing Revolving Loan Program Multifamily Rental Housing Program Public Housing Construction and Permanent Loan Program Rental Housing Incentive Finance Fund 100% Mortgage Program Urban Home Ownership Recovery Program Low-Income Housing Tax Credit Allocation Program	
NJ Redevelopment Authority:NJ Urban Site Acquisition Program	
US Department of Housing and Urban Development (HUD) Section 811 Supportive Housing for Persons with Disabilities Section 202 Supportive Housing for the Elderly HOPE VI Grants HOME Program	
US Department of AgricultureRural Resources Administration (formerly Farmers' Home Administration)	
Other (Please specify)	
List the information of the State or Federal financing or insuring agency's contact person: Name: Title:	
Department/Agency:Address:	
Telephone Number	

URBAN RENEWAL ENTITIES DISCLOSURE INFORMATION, PAGE 4

NAME OF URBAN RENEWAL ENTITY: _____

SECTION 6: PROJECT CONSTRUCTION	NOWNERSHIP			
(Check one)				
1. The project is new construction.				
2. An existing project is being rehabili	itated.			
If rehab, specify name of individual, entity, etc. who is the current owner of the project.				
	being transferred to the new urban renewal entity. lual, entity, etc. from whom the project is being or has been			
	vidend corporation or association, established pursuant to the busing Corporations and Associations Law, N.J.S.A.55:16-1 et			
Is the transferor entity an existing Exemption Law, N.J.S.A. 40A:20-	urban renewal entity established pursuant to the Long Term Tax -1 et seq.? (yes or no)			
4. Has this project caused or will this p	project cause displacement of individuals or businesses? (yes or			
	ed by an individual authorized to execute the certificate of of limited partnership (general partner), or other similar certificate			
understand that failure to fully and accurate while the Department investigates the application urban renewal entity may be subject to add the requirements of the Limited Dividend at seq., the Long Term Tax Exemption Lat	in is truthful and accurate to the best of my knowledge and tely disclose any information may delay processing the application lication and project. Further, I understand that any project of the ditional Department review and approval, pursuant to and Nonprofit Corporations or Associations Law, N.J.S.A. 55:16-1 w, N.J.S.A. 40A:20-1 et seq., and/or rules governing Limited ons and Associations and Urban Renewal Entities, N.J.A.C. 5:13-			
Sworn to me and subscribed before me th day of (mo/day/year)	is X(authorized individual's signature)			
(notary public/attorney)	(print name of authorized individual)			
Rev. 8/2006				